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08/01/2007 CUSTOMER NUMBER 22850

FILING DATE

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ritor's nu (Sie (Dst FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO.

2451391158

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10/702.573 11/07/2003 TITLE OF INVENTION: SIGNAL SWITCHING DEVICE

7590

22850

APPLICATION NO.

| APPLN, TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|---|---------------|---|---------------------|----------------------|---|------------|
| nonprovisional | NO | \$1440 | \$300 | \$0 | \$1740 | 11/01/2007 |
| EXA | AINER | ART UNIT | CLASS-SUBCLASS | | | |
| VIJAYAKUMAR, | KALLAMBELLA M | 1751 | 505-100000 | | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.50). Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/12) attached. Use of a Customer Number is record. | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | era 2 McClell | 1 Oblon, Spivak, 2 McClelland, Maier 3 & Neustadt, P.C. | |

Kunihiro Kawai

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

NTT DoCoMo, Inc.

Tokyo, JAPAN

Please check the appropriate assignce category or eategories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted: ☑ Issue Fee

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.

☑ Publication Fee (No small entity discount permitted) Advance Order - # of Copies _ -2Payment by credit card. Transmitted via EFS-Web. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27 □ b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will interest as shown by the records of the United States Pagent ne other than the applicant; a registered attorney or agent; or the assignee or other party in

Authorized Signature James H. Knebe Typed or printed name

OCT 3 1 2007

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